plication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

209053

CLAIMS AS FILED - PART I (Column 1)					(Colur	mn 2)	SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			37				R	ATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			37 minus 20=		• 17		X	\$ 9=		OR	X\$18=	306
INDEPENDENT CLAIMS			2_ minus 3 =		. 0		X	40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							+1	35=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	TC	OTAL		OR	TOTAL	1016	
	CI	LAIMS AS A	MENDED	D - PART II							OTHER THAN	
		(Column 1)	(Column 2)			(Column 3)	SM	SMALL ENTIT		OR SMALL E		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL ALLA		Х	40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	I CLAIM		+1	35=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 3)	ADD	IT. FEE			AUUII. FEE					
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREV	IMN 2) HEST MBER IOUSLY O FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDÍ- TIONAL FEE
	Total	*	Minus	**		=	Х	\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	X	40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	135=		OR	+270=	
								TOTAL	<u> </u>	OR	TOTAL	
			ADD	IT. FEE		On	ADDIT. FEE					
_		(Column 1) CLAIMS	1		ımn 2) HEST	(Column 3)						T
AMENDMENT C		REMAINING AFTER AMENDMENT		NUI PREV	MBER TOUSLY D FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	Х	\$ 9=		OR	X\$18=	·
	Indep nd nt	*	Minus	***	IT OL ALL	=	X	40=		OR	X80=	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+	135=		OR		
	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." 									OR	TOTAL	
	*If the "Highest Ni	ımber Previously F umber Previously F mber Previously Pa	Paid For" IN TH	IS SPACE	E is less th	an 3, enter "3."		TOTAL IT. FEE in the ap	propriate bo		ADDIT. FEE olumn 1.	